

SENATE BILL REPORT

SB 5117

As Reported by Senate Committee On:
Health & Long-Term Care, February 02, 2009

Title: An act relating to intensive behavior support services for children with developmental disabilities.

Brief Description: Establishing intensive behavior support services.

Sponsors: Senators Hargrove, Kauffman, Stevens, Kline and Marr; by request of Department of Social and Health Services.

Brief History:

Committee Activity: Health & Long-Term Care: 1/28/09, 2/02/09 [DPS].

SENATE COMMITTEE ON HEALTH & LONG-TERM CARE

Majority Report: That Substitute Senate Bill No. 5117 be substituted therefor, and the substitute bill do pass.

Signed by Senators Keiser, Chair; Franklin, Vice Chair; Pflug, Ranking Minority Member; Becker, Fairley, Marr, Murray and Parlette.

Staff: Rhoda Donkin (786-7465)

Background: Children with a developmental disability may also have behaviors which are violent, disruptive, or destructive toward themselves or family members. These children may be difficult to handle when they are small, but as they age, they may become a threat to others. Families with children who have intense behavior issues have difficulty responding and, in the past, services to assist these families have been scarce. In recent years, 21 individuals under age 21 have been admitted for both short- and long-term stays to Fircrest, a residential habilitation center in Shoreline. This was due, in part, to the lack of services available in the community to support families in crisis.

In 2008 the Legislature funded in-home services to families providing specialized behavioral support. Currently the state is awaiting approval from the federal government for a Medicaid waiver to provide this program to families with children who are eligible for these services.

Summary of Bill (Recommended Substitute): The Department of Social and Health Services (DSHS) must establish a program to support children with challenging behaviors to

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remain at home. DSHS must develop new contracts and recruit qualified providers to deliver services addressing each eligible child's unique needs. Collaboration is required between service providers, family members, schools, and health practitioners to establish effective supports for each child in multiple settings. The program must include intensive case management, evaluation, and monitoring.

EFFECT OF CHANGES MADE BY HEALTH & LONG-TERM CARE COMMITTEE (Recommended Substitute): Added language clarifies that some respite care may be out of home, that families are expected to coordinate with professionals, and that services include personal care.

Appropriation: None.

Fiscal Note: Requested on January 26, 2009.

Committee/Commission/Task Force Created: No.

Effective Date: Ninety days after adjournment of session in which bill is passed.

Staff Summary of Public Testimony on Original Bill: PRO: All families want to be able to care for their children. Providing support to families with very difficult children with disabilities will allow them to manage the extreme behaviors and avoid out-of-home placements. When children are removed from their home, the impact on everyone is traumatic. Creating a program in statute provides some needed direction from the Legislature on how the state should manage its obligation to persons with developmental disabilities.

Persons Testifying: PRO: Patty Gee, Executive Director/Autism Society of Washington; Linda Rolfe, DSHS; Donna Patrick, Developmental Disabilities Council.